U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE ATTORNEY'S DOCKET NUMBER FISCHER23 10/588074 TRANSMITTAL LETTER TO THE UNITED STATES U.S. APPLICATION NO. (If known, see 37 CFR 1.5) **DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371** Not Yet Assigned PRIORITY CLAIMED INTERNATIONAL FILING DATE INTERNATIONAL APPLICATION NO. February 2, 2005 February 2, 2004 PCT/IL2005/000118 TITLE OF INVENTION INORGANIC BORANOPHOSPHATE SALTS APPLICANT(S) FOR DO/EO/US Bilha FISCHER et al. Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: 1. [X] This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. 2. [] This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. 3. [X] This is an express request to begin national examination procedures (35 U.S.C. 371(f)) as soon as the application is in order for such purpose and the applicable requirements of 35 U.S.C. 371(c) have been complied with. 4. [] The US has been elected (Art 31). 5. [X] A copy of the International Application as filed (35 U.S.C. 371(c)(2)) a. [] is attached hereto (required only if not transmitted by the International Bureau). b. [X] has been communicated by the International Bureau. c. [] is not required, as the application was filed in the United States Receiving Office (RO/US). 6. [] An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)). a. [] is attached hereto. b. [] has been previously submitted under 35 U.S.C. 154(d)(4). 7. [X] Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) a. [] are transmitted herewith (required only if not transmitted by the International Bureau). b. [] have been communicated by the International Bureau. c. [] have not been made; however, the time limit for making such amendments has NOT expired. d. [X] have not been made and will not be made. 8. [] An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). 9. [X] An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)). 10. [] An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). Items 11. to 16. below concern document(s) or information included: 11. [X] An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 12. [] An Assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. [X] A FIRST preliminary amendment. 14. [X] An Application Data Sheet under 37 CFR 1.76. 15. [] A substitute specification. 16. [] A change of power of attorney and/or address letter. 17. [] A computer-readable sequence form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825. 18. [] A second copy of the published International Application under 35 U.S.C. 154(d)(4). 19. [] A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4) 20. [X] Other items or information: [X] Courtesy copy of the International Application as filed. [X] Courtesy copy of the first page of the International Publication (WO 2005/072062 A2). [X] Formal drawings, 5 sheets, Figures 1A-6. [X] Courtesy Copy of the International Search Report. [X] The application is (or will be) assigned to: Barilan University whose address is Bar-Ilan University, 52900 Ramat-Gan, Israel.

IAP5 Rec'd PCT/PTO 31 JUL 2006

	NO. (If knowr	-	•	International Application N			Attorney's Docket	
Not Yet A	lssign	eg R	807	ACT/IL2005	/000:	118	FISCHER	•
21. The followin	g fees are	submitted		•			CALCULATION	S PTO USE ONLY
[xx] a) BASIC	CNATIO	NAL F	EE (37 CF	FR 1.492(a))	• • • • • • • •	.\$300.00		
[xx] b) SEARCH FEE (37 CFR 1.492(b))								
[xx] US v	was Intern	national S	Searching	Authority		.\$100.00		
Other ISR provided to USPTO\$400.00								
All other situations\$500.00						\$600.00	· · · · · · · · · · · · · · · · · · ·	
[xx] c) EXAMINATION FEE (37 CFR 1.492 (c))							\$000.00	
			•	· //			}	
	_	_		IPER				
[xx] All c	other situa	ations	• • • • • • • • • • • • • • • • • • • •	•••••		\$200.00		·
			TO	TAL OF ABOVE C	ALCU:	LATIONS:		
_				ration later than [] 20	[]30		\$	
months from the ea		<u>.</u>		K 1.492(h)). f each additional 50 or fi	raction	RATE		:
	Little Co	JILL 13		ound up to a whole numb		(1.492(g))	•	
33 - 100		/50				X \$250.00		· ·
CLAIMS			er Filed	Number Extra	Rate (1.492 (d-f))		
Total Claims			20 =		X \$ 5	0.00	\$	
Independent Claims			3 =		X \$20		\$	
Multiple Dependen	t Claims (if	applicable	e)		+ \$36		\$	
				TOTAL OF ABOVE			\$600.00	
Reduction of ½ for CFR 1.27.	filing by sn	nall entity,	if applicable	e. Applicant claims sma	ll entity s	status. See 37	-\$300.00	
CIR 1.27.						SUBTOTAL =	\$300.00	
Processing fee of \$130.00 for furnishing the English translation later than [] 20 [] 30						\$		
months from the ear	rliest claim	ed priority	date (37 CF	` ` ' '		-		•
			(05.000.1			ONAL FEE =	\$300.00	
Fee for recording th		_	t (37 CFR 1	.21(h)). The assignment	must be		\$	I
i accominamen nv ab	-anntontiate	e cover she	et (37 CFR 1	• • • • • • • • • • • • • • • • • • • •				l i
accompanied by an	appropriate	e cover she	et (37 CFR :	3.28, 3.31). \$40.00 per p	roperty	+	\$300.00	,
accompanied by an	appropriate	e cover she	et (37 CFR :	3.28, 3.31). \$40.00 per p	roperty		\$300.00 Amount to be:	\$
accompanied by an	appropriate	e cover she	et (37 CFR :	3.28, 3.31). \$40.00 per p	roperty	+	Amount to be: refunded	\$
			et (37 CFR	3.28, 3.31). \$40.00 per p	roperty	+	Amount to be:	\$ \$
Payment Method			et (37 CFR	3.28, 3.31). \$40.00 per p	roperty	+	Amount to be: refunded	
Payment Method	d (check o	ne only)		3.28, 3.31). \$40.00 per p TOTAI	FEES F	+ ENCLOSED =	Amount to be: refunded	
Payment Method	d (check o	ne only)	et (37 CFR	3.28, 3.31). \$40.00 per p TOTAI	FEES F	+ ENCLOSED =	Amount to be: refunded	
Payment Method	d (check o	ne only) unt of \$		3.28, 3.31). \$40.00 per p TOTAI	FEES F	+ CNCLOSED =	Amount to be: refunded charged	
Payment Method a. [] A check in b. [X] Credit Can	d (check on the amount of Paymer	ne only) unt of \$ nt Form (F	PTO-2038),	to cover the above authorizing payment	FEES Fees is in the a	enclosed.	Amount to be: refunded charged 0.00, is attached.	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha	d (check on the amount of Paymer arge my D	ne only) unt of \$ ut Form (F	PTO-2038),	to cover the above authorizing payment 02-4035 in the amount	FEES Fees is in the a	enclosed.	Amount to be: refunded charged	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha	d (check on the amount of Paymer arge my D	ne only) unt of \$ ut Form (F	PTO-2038),	to cover the above authorizing payment 02-4035 in the amount	FEES Fees is in the a	enclosed.	Amount to be: refunded charged 0.00, is attached.	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha	d (check on the amore rd Paymer arge my Date copy o	ne only) unt of \$ nt Form (F eposit Acc f this shee	PTO-2038), count No. (et is enclose	to cover the above authorizing payment 22-4035 in the amounted.	FEES Fees is in the a	enclosed.	Amount to be: refunded charged 0.00, is attached.	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica	d (check on the amore rd Paymer arge my Date copy o	ne only) unt of \$ nt Form (F eposit Acc f this shee	PTO-2038), count No. (et is enclose	to cover the above authorizing payment 22-4035 in the amounted.	FEES Fees is in the a	enclosed.	Amount to be: refunded charged 0.00, is attached.	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commi	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) unt of \$ nt Form (F eposit Acc f this shee ies (check hereby au	PTO-2038), count No. (et is enclose tone only)	to cover the above authorizing payment 22-4035 in the amounted.	roperty FEES F e fees is in the a t of \$	enclosed. mount of \$300	Amount to be: refunded charged 0.00, is attached.	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commi	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) unt of \$ nt Form (F eposit Acc f this shee ies (check hereby au	PTO-2038), count No. (et is enclose tone only)	to cover the above authorizing payment 22-4035 in the amounted.	roperty FEES F e fees is in the a t of \$	enclosed. mount of \$300	Amount to be: refunded charged 0.00, is attached. to cover the above fees	\$
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplicate Handling of Fee [] The Committo Deposit A	d (check on the amount of Paymer arge my Date copy of the copy of	ne only) unt of \$ nt Form (F eposit Acc f this sheet ies (check hereby au lo. 02-403	PTO-2038), count No. (et is enclosed to one only) athorized to	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet	roperty FEES F e fees is in the a t of \$ I fees w t is encl	enclosed. mount of \$300 hich may be recosed.	Amount to be: refunded charged 0.00, is attached. to cover the above feese	\$ verpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplicate Handling of Fee [] The Committo Deposit A [X] If a deficient	d (check on the amount of Paymer arge my Date copy of the copy of	ne only) unt of \$ nt Form (F eposit Acc f this sheet hereby au lo. 02-403	PTO-2038), count No. (et is enclosed to one only) athorized to 5. A dupli	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.45	roperty FEES F e fees is in the a t of \$ I fees w t is encl	enclosed. mount of \$300 hich may be recosed.	Amount to be: refunded charged 0.00, is attached. to cover the above fees	\$ verpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplicate Handling of Fee [] The Committo Deposit A	d (check on the amount of Paymer arge my Date copy of the copy of	ne only) unt of \$ nt Form (F eposit Acc f this sheet hereby au lo. 02-403	PTO-2038), count No. (et is enclosed to one only) athorized to 5. A dupli	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.45	roperty FEES F e fees is in the a t of \$ I fees w t is encl	enclosed. mount of \$300 hich may be recosed.	Amount to be: refunded charged 0.00, is attached. to cover the above feese	\$ verpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplicate Handling of Fee [] The Commit to Deposit A [X] If a deficient no authorizate NOTE: Where a	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) unt of \$ nt Form (F eposit Acc f this shee ies (check hereby au lo. 02-403 in the basi ven to cha	count No. (et is enclosed to one only) thorized to continue to the count of the cou	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 are fees. der 37 CFR 1.494 or	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be recosed. ease charge it	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02	\$ verpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplicate Handling of Fee [] The Commit to Deposit A [X] If a deficient no authorizate NOTE: Where a	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) unt of \$ nt Form (F eposit Acc f this shee ies (check hereby au lo. 02-403 in the basi ven to cha	count No. (et is enclosed to one only) thorized to continue to the count of the cou	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.45 her fees.	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be recosed. ease charge it	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02	severpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authorization of the commit of the committee of the commit of the committee of the commit	d (check on the amore rd Paymer arge my Date copy of the copy of the copy of the count Nation is given an appropriate and grand gran	ne only) ant of \$ ant Form (Form	TO-2038), count No. (et is enclose cone only) thorized to 5. A dupli c national in trge any oth e limit une store the a	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be recosed. ease charge it	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02	severpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authoriza NOTE: Where a (b)) must be filed Direct all correspond	d (check on the amore rd Paymer arge my Date copy of the copy of the count Nation is given an appropriate and grand dence to the count of the count	ne only) ant of \$ ant Form (Fi eposit Acc of this sheet ies (check hereby aut lo. 02-403 in the basi wen to cha priate time ted to rese	TO-2038), count No. (et is enclose cone only) athorized to 5. A dupli c national in arge any oth store the a	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be recosed. ease charge it	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02	severpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please chack duplicate Handling of Fee [] The Committo Deposit A [X] If a deficient no authorizate NOTE: Where a correspond CUSTOMER NUMBER	d (check of the amore of Paymer arge my Date copy of the copy of t	ne only) ant of \$ ant Form (Form	count No. (et is enclosed to one only) athorized to one only)	to cover the above authorizing payment 02-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02	severpayment
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authoriza NOTE: Where a (b)) must be filed Direct all correspond	d (check of the amore of Paymer arge my Date copy of the copy of t	ne only) ant of \$ ant Form (Form	count No. (et is enclosed to one only) athorized to one only)	to cover the above authorizing payment 02-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it as not been may	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02 et, a petition to revive	severpayment 4035. At this time, e (37 CFR 1.137(a)) or
Payment Method a. [] A check in b. [X] Credit Can c. [] Please chack duplicate Handling of Fee [] The Committo Deposit A [X] If a deficient no authorizate NOTE: Where a correspond CUSTOMER NUMBER	d (check of the amore arge my Date copy of the amore is Account Nation is given an appropriate and grand dence to the BER 001444	ne only) ant of \$ nt Form (Form	TO-2038), count No. (et is enclose cone only) athorized to 5. A dupli c national in arge any oth elimit une store the a essociated w currently: p.L.L.C	to cover the above authorizing payment 02-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it as not been m	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02 et, a petition to revive	severpayment 4035. At this time, e (37 CFR 1.137(a)) or
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authoriza NOTE: Where a (b)) must be filed Direct all correspond CUSTOMER NUMB	d (check on the amore arge my Date copy of the copy of	ne only) ant of \$ nt Form (Form	count No. (et is enclosed to some only) thorized to some only) thorized to some only of the limit under the analyst of the a	to cover the above authorizing payment 02-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it as not been m	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02 et, a petition to revive IGNATURE Sheridan Neimark	severpayment 4035. At this time, e (37 CFR 1.137(a)) or
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authoriza NOTE: Where a (b)) must be filed Direct all correspond CUSTOMER NUMB BROWDY AN 624 NINTH S	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) ant of \$ nt Form (Form	count No. (et is enclosed to some only) thorized to some only) thorized to some only of the limit under the analyst of the a	to cover the above authorizing payment 02-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it as not been m	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02 iet, a petition to revive IGNATURE Sheridan Neimark NAME	severpayment 2-4035. At this time, 2-37 CFR 1.137(a) or
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authoriza NOTE: Where a (b)) must be filed Direct all correspond CUSTOMER NUMB BROWDY AN 624 NINTH S WASHINGTO TEL: (202) 628- FAX: (202) 737-	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) ant of \$ nt Form (Form	count No. (et is enclosed to some only) athorized to some only) athorized to some only of the limit under the accordated we currently: P.L.L.C. SUITE	to cover the above authorizing payment 02-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it as not been may	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02 et, a petition to revive set, a petition to revive Sheridan Neimark NAME 20,520 REGISTRATION NUMB	severpayment 2-4035. At this time, 2-37 CFR 1.137(a) or
Payment Method a. [] A check in b. [X] Credit Can c. [] Please cha A duplica Handling of Fee [] The Commit to Deposit A [X] If a deficient no authoriza NOTE: Where a (b)) must be filed Direct all correspond CUSTOMER NUMB BROWDY AN 624 NINTH S WASHINGTO TEL: (202) 628-	d (check on the amore rd Paymer arge my Date copy of the copy of t	ne only) ant of \$ nt Form (Fine posit According this sheet ies (check hereby autho. 02-403 in the basis ven to character time ted to reserve address at the which is a MARK, N.W., C. 20001	count No. (et is enclosed to some only) athorized to some only) athorized to some only of the limit under the accordated we currently: P.L.L.C. SUITE	to cover the above authorizing payment 22-4035 in the amounted. charge any additional cate copy of this sheet fee set by 37 CFR 1.49 feer fees. der 37 CFR 1.494 or pplication to pending with	roperty FEES F e fees is in the a t of \$ I fees w t is encl 92(a), p	enclosed. mount of \$300 hich may be reposed. ease charge it as not been may	Amount to be: refunded charged 0.00, is attached. to cover the above fees equired, or credit any of to Deposit Account 02 tet, a petition to revive set, a petition to revive Sheridan Neimark NAME 20,520	severpayment 2-4035. At this time, 2-37 CFR 1.137(a) or